

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	HM		11-120-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A-S	943	11-28-1
RESPONSE FORMALITY REVIEW	AM	917	03-01-02

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 -+ ..... Restricted      0 ..... Objected

Claim	Date
Final	Original
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Claim	Date
Final	Original
51	5/8
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Claim	Date
Final	Original
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If more than 150 claims or 10 actions  
staple additional sheet here